PATENT - BRTC

5136346108

Please type a plus sign (+) inside this box \rightarrow [+]

PTO/SB/30 (06-03)
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

Application Number REQUEST 09/888.714 Filing Date 06/25/2001 **FOR** First Named Inventor **CONTINUED EXAMINATION (RCE)** Johan Smets Group Art Unit 1751 TRANSMITTAL Address to: Examiner Name Preeti Kumar Mail Stop RCE CM2380 Attorney Docket Number Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Confirmation Number 8782

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.

NOTE: Request for Continued Examination (RCE) practice under 37 C.F.R. 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

	1.	Submission rec	ulred under 37 C.F.R. § 1.114		•		
		ii. [] Consiii. [] Othe b. Enclosed i. [X] Am	sly submitted sider the amendment(s)/reply under 37 C.F.R. §1.116 previously filed on		previously filed on		
	2 MT	iii. [] Infor iv. [] Othe	mation Disclosure Statement (IDS)	ICIAL	440 OFF		
:/01/5044	D.MTOMARCe MANAGOUS 162480 09888714						
FC:1801	period of months. (Period of suspension shall not ex						
ı		b. [] Other	_				
5	3. Fees The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed.						
	 [X] The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 16-2480. i. [X] RCE fee required under 37 C.F.R. §1.17(e) ii. [X] Extension of time fee (37 C.F.R. §§1.136 and 1.17) iii. [] Suspension of action fee under 37 C.F.R. 1.17(i) iv. [] Other 						
			SIGNATURE OF APPLICANT,	AGENT REQUIRED			
	NAME (Print/Type) SIGNATURE		Frank Taffy	Reg. No. (Attorney/Agent) 52, 270		
٤			1-11/1	1/2	DATE September 15, 2003		
			CERTIFICATÉ OF MA				
i e	evne	hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an nvelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Latent and Trademark Office on the date shown below:					
NAME (Print/Type) Donita Konrad							
٤	SIG	NATURE	Donite Kongad		DATE September 15, 2003		

This collection of information is required by 37 CFR 1.114. The immunition is required to collar or relating to the packs which is to lite (air by the CGF) to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to completed sphication form to the USPTO. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office P.O. Box 1450, Alexandria, VA 22313-1450. The PROCESS of COMPLETED FORMS TO THIS ADDRESS. Sond Tests and Completed forms to the following address: Mell Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. (Revised for P&G use 6/3/2003)

5136346108

P.03/09

PTO/SB/17 (01/2003)

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

•	

FEE TRANSMITTAL	Complete if Known		
for FY 2003	Application Number	09/888,714	
Patent fees are subject to annual revision.	Confirmation Number	8782	
	Filing Date	06/25/2001	
	First Named Inventor	Johan Smets	
	Examiner Name	Preeti Kumar	
	Group/Art Unit	1751	
TOTAL AMOUNT OF PAYMENT (\$)2,200.00	Attorney Docket No.	CM2380	

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)			
1. [X] The Commissioner is hereby authorized to charge indicated	3. ADDITIONAL FERS			
fees and credit any over payments to:	Code (\$) Fee Description Fee Paid			
Deposit Account Number 16-2480	1051 130 Surcharge-late filing fee or oath	ß		
Deposit Account Name The Procter & Gamble Company	1052 50 Surcharge-late provisional filing fee or cover sheet	D		
[X] Charge Any Additional Pee Required Under status. 37 C.F.R. §§1.16 and 1.17	1053 130 Non-English specification	0		
[22]	1812 2,520 For filing a request for ex parte reexamination	Ð		
	1804 920* Requesting publication of SIR prior to			
	Examiner's action	U		
FEE CALCULATION	1805 1,840* Requesting publication of SIR after Examiner's action	0		
1. BASIC FILING FEE Lurge Entity	1251 110 Extension for reply within 1st month	8		
r. marks A v versi 1/2 s. sters reside commit	1252 410 Extension for reply within 2 nd month	Ö		
Code (P) Ton Departmenton For Bold		0		
Code (5) Fee Description Fee Paid 100) 750 Utility filing fee []		(1450)		
1007 750 Clinty mang less []		0		
1004 750 Reissue filing fee []	1401 320 Notice of Appeal	Ö		
1005 160 Provisional filing fee []	1402 320 Filing a brief in support of an appeal	Ö		
1003 100 110400000 10016 100	1403 280 Request for oral hearing	Ö		
SUBTOTAL (1) (\$)[]	1451 1,510 Petition to institute a public use proceeding	Ū		
	• • • • • • • • • • • • • • • • • • • •	Ō		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE - Large Entity	1453 1,300 Petition to revive - unintentional	0		
		ō		
Extra Pee from Pee	1502 470 Design issue fee	Ö		
Claims Below Paid	1460 130 Petitions to the Commissioner	0		
Total Claims [] - 20** = [] x [] =:[]	1807 50 Petitions related to provisional applications	0		
-	(37 C.F.R. 1.17(q))			
Independent Claims [] - 3** = [] x [] =[]	1806 180 Submission of Information Disclosure Statement	0		
Multiple Dependent [] =[]	1809 750 Filing a submission after final rejection			
** or number previously paid, if greater; For Reissues, see below	(37 CFR § 1.129(a))	()		
	1810 750 Por each additional invention to be			
Code (\$) Fee Description	• • • •	[]		
1202 18 Claims in excess of 20		[750]		
1201 84 Independent claims in excess of 3	1802 900 Request for expedited examination of a design application	0		
1203 280 Multiple dependent claim, if not paid	1454 1300 Acceptance of unintentionally delayed claim for	0		
1204 84 **Reissue independent claims over original patent	priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)			
1205 18 **Reissue claims in excess of 20 & over original patent				
	Other fee (specify)	0		
	Other fee (specify)	D.		
SUBTOTAL (2) (\$)[]	* Reduced by Basic Filing Fee Paid SUBTOTAL(3) (\$) [2	200.00		

SUBMITTED BY	1	7		Comple	Complete (if applicable)	
Name (Print/Type)	Frank Taffy	Registration No.	52,270	Telephone	(513) 634-9315	
Signature	1/1	-1/1/K		Date	September 15, 2003	

WARNING: Information on this fighter precons public. Credit and Engelies and sold for the incident on this fighter precons public. Credit and Engelies and sold for the incident on this form. Provide credit card information and suchorization on PTO-2038.

Burden Hour Statement: This form is embracted to Date 0.2 bother to complete. This will furly depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sented the Chef Information Officer, Panent and Treatment Office, Washington, D.C. 2023 I. DO NOT SEND FEES OR COMPLETED PORMS TO THIS ADDRESS. SEND TO: Commissioner for Patrnis, P. O. Box 1450. Alexandria, VA 22313-1450.